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DATE: October 20, 2005

CLIENT-MATTER NO.: 23540-10616
23540-10726
23540-10727
23540-10728

To:

NAME	FAX NO.	PHONE NO.
U.S. Patent and Trademark Office Central Fax Number	(571) 273-8300	

FROM: Michael J. Shuster

PHONE: (415) 875-2413

SENT BY: Tomika Thomas

PHONE: (415) 875-2474

NUMBER OF PAGES WITH COVER PAGE: 10	ORIGINAL WILL NOT FOLLOW
MESSAGE: <ul style="list-style-type: none">• REVOCATION AND POWER OF ATTORNEY;• STATEMENT UNDER 37 CFR 3.73(B)<ul style="list-style-type: none">Appln. No.: 09/927,315Appln. No.: 10/190,417Appln. No.: 10/645,441Appln. No.: 10/679,102	

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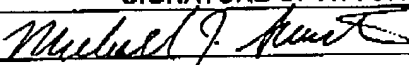
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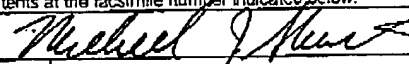
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TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>	Application Number	NA	
	Filing Date	NA	
	First Named Inventor	NA	
	Group Art Unit Number	NA	
	Examiner Name	NA	
Total Number of Pages in This Submission	10	Attorney Docket Number	

ENCLOSURES <i>(check all that apply)</i>	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
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<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appln. No.: 09/927,315
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/> Appln. No.: 10/190,417
<input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/> Appln. No.: 10/645,441 (w/Assignment - Not for Recordation)
<input type="checkbox"/> Status Request	<input type="checkbox"/> Appln. No.: 10/679,102
<input checked="" type="checkbox"/> Revocation and Power of Attorney (1 pg)	<input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT	
Signature:	
Attorney/Reg. No.:	Michael J. Shustar, Reg. No.: 41,310
Dated:	October 20, 2005

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.	
Signature:	
Typed or Printed Name:	Michael J. Shustar
Dated:	October 20, 2005
Facsimile Number:	1-571-273-8300

23540/01000/SF/5153702.1

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b)

I hereby appoint:

☒ Practitioners associated with the Customer Number

758

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

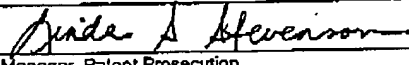
Assignee Name and Address:

The Regents of the University of California
A California Corporation
1111 Franklin Street, Twelfth Floor
Oakland, CA 94607-5200

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Linda S. Stevenson	Date	July 27, 2005
Signature		Telephone	(510) 587-6000
Title	Manager, Patent Prosecution		

23540/10616/SF/5148081.1

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OCT 20 2005

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Zuker, Charles S.Application No./Patent No.: 10/645,441Filed/Issued Date: August 20, 2003Entitled: Mammalian Sweet Taste ReceptorsThe Regents of the University of California, aUniversity

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is 50%
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- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____.

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- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

October 20, 2005
Date(415) 875-2413
Telephone numberMichael J. Shuster

Typed or printed name

Michael J. Shuster
SignatureAttorney

Title

23540-10727US (UC Ref. No.: 2001-510-5)

23540/01000/SF/5151720.1